

Outlook

2nd quarter FY 08

ALABAMA DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION



Tim DeChant
begins his first
day at college

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Outlook is a quarterly newsletter of the Alabama Department of Mental Health and Mental Retardation. It contains articles and information about department initiatives, community mental health services, individual success stories, and relevant national topics.



Mission Statement

It is the mission of the Alabama mental health service delivery system to “Lift Life’s Possibilities” by ensuring that the mental illness, mental retardation and substance abuse recovery needs of the state’s citizen’s are addressed in a manner that is maximally effective and efficient, while promoting the individual’s quality of life, human worth, and dignity.



Letter from the *Commissioner*

It is difficult to single out a particular topic or two to write about in our quarterly newsletter because there are so many significant items that are newsworthy. Having said that, I must express my gratitude to the people in our Office of Finance, Associate Commissioners, David Jackson, Anne Evans and Jane Davis for helping me compile and present our FY 09 budget requests to the Governor and the joint budget committees of the Alabama Legislature. Also, the Coordinating Sub-Committees and the Management Steering Committee have made valuable contributions in developing strategies for the allocation of resources, given the apparent budget challenges for FY 09. On many occasions I have called the budgeting process the “365 day a year” conversation. It seems that after we have crossed the budget bridge for one year we must begin to prepare for the next. I very much appreciate everyone’s assistance in this fundamental issue.

While we address our budget each year for the short-term we must not lose sight of the need for long-term planning. Over the past 14 months we have held numerous local and regional meetings to assess needs, analyze resources and develop a vision of what the ideal mental health system should look like five, ten and even twenty years from now in our state. Again, I must express gratitude to my staff, community providers, private sector leaders and others who have spent a great deal of time working on what will become a long-term systems transformation plan. Paramount to the entire process has been the wide-spread input of consumers, family members and advocacy leaders. If we are to have a “consumer and family driven” system it is essential that their voice be heard and given the highest priority in the development of our long-term plan.

I have often said that the DMHMR has the finest workforce of any agency in state government. It is only right that I extend that compliment to those who work everyday in the community to “Lift Life’s Possibilities” for the people we serve. If we continue to work together we can help many individuals realize their potential, develop their abilities and experience recovery in an environment of community inclusion, respect and opportunity. At times it may feel like we are swimming upstream against a current of challenges. Progress takes courage and perseverance. The reward of truly making a difference is worth it!

John M. Houston





Planning from the “Ground Up”

Series of Statewide Meetings Seek Grassroots Feedback

One of the issues Commissioner Houston is committed to is using a grassroots approach to the department’s planning process that emphasizes planning from the “ground up,” designed to involve a broad-base of stakeholder groups to identify needs and make recommendations from the local level. This is a shift from the previous planning process, and in order to facilitate this change, a series of Local Community Needs Assessment Meetings were held statewide throughout the months of October to January. The purpose of these meetings was to gather information from consumers, family members, advocates, providers and other stakeholders as to the mental illness, mental retardation and substance abuse recovery needs in their communities.

In striving to meet the Commissioner’s goal of involving as many people in the planning process as possible and giving them a viable role in departmental planning, the Office of Policy and Planning worked with the local 310 boards to coordinate the meetings, publicize the meetings, act as facilitators and record the needs that the groups identified at these meetings.

With the conclusion of these local meetings in January, the office is now in the process of coordinating Regional Planning Meetings throughout the state. At these regional meetings, selected representatives from

the local meetings are taking all of the information gathered in their area and compiling it into regional goals and strategies for both adult services and childrens’ services across all three of the department’s service divisions.

This process is crucial as the representatives are both learning about the department’s current initiatives and goals and combining those with the needs taken from the Local Community Needs Assessment Meetings. While specific topics are still being discussed, it is apparent that there are similarities between all three divisions in terms of needs, and a good dialogue is being established as far as the unique strategies to meet these needs.

Once this process is complete, the regional planning groups will submit their recommendations to the coordinating subcommittees from each division, who will in turn prioritize goals and develop objectives. The prioritized goals, strategies and objectives will be presented to the Management Steering Committee. They will in turn make their recommendations to the Commissioner for inclusion in the Governor’s 2010 SMART Plan for the Alabama Department of Mental Health and Mental Retardation. ❖

Can a Blood Test Diagnose a Mental Illness?

While blood tests have long been used to diagnose diseases such as cancer and diabetes, researchers have never found a lab test that can accurately detect a mental illness. That may be changing in the near future. A blood test could be used to diagnose and assess the severity of certain mental illnesses, particularly bipolar disorder. However, the testing is not without controversy.

Current diagnosis for bipolar disorder and other mental illnesses such as depression are made based on the patient's description of their symptoms and the physician's judgement, which sometimes makes it difficult to get an accurate assessment or determine the severity of conditions. Now, researchers have shown that 10 genes can be detected in the blood that could provide a better way to assess a patient. Dr. Alexander Niculescu, a psychiatrist at the Indiana University of Medicine, led the research that first had a goal of identifying genes or biomarkers that could be used to track the severity of the symptoms of mania or depression in people already diagnosed with bipolar disorder. They have found, however, that these same genes could be used as a test to make an initial diagnosis.

Niculescu says, "Having an objective test for disease state, disease severity, and especially to measure response to treatment, would be a big step forward." Perhaps the biggest benefit of this testing for consumers would be ensuring that they are getting the right medication. Often, bipolar patients visit their physician when they are in a low period, and may be misdiagnosed with depression. This could lead to the prescribing of antidepressants, which may trigger a manic state in some. A blood test that could be used to monitor the patient could let physicians catch this mood elevation before it becomes problematic.

However, the testing is not without its drawbacks. Many experts say there is likely to be much more controversy with genetic testing when it's about behavior, mental states and personality characteristics, especially if those tests could be used to screen for mental illness in the workplace or for college admittance and result in discrimination. Excerpts for this article were taken from an MSNBC story, "Blood test could reveal bipolar disorder." To read the full story, visit <http://www.msnbc.msn.com/id/23337532/from/ET>. ❖

A Step Closer to Mental Health Parity

The U.S. House of Representatives recently passed a mental health insurance parity bill by a vote of 268-148. This bill seeks to outlaw health insurance practices that discriminate against Americans with mental illness and substance addiction under employer-sponsored health care plans. The bill will require insurance plans to cover these illnesses on the same terms and conditions as other illnesses regarding the number of doctor visits, hospital stays, co-payments and other provisions.

"Illness of the brain must be treated just like illness anywhere else in the body."

The Paul Wellstone Mental Health and Addiction Equity Act (H.R. 1424) would dispose of practices that have caused needless suffering, reduced workplace productivity and increased health care costs while contributing to higher costs in the public health care system. In working to get the bill passed in the House, many legislators from both parties spoke about their personal experiences with mental illness, the burdens faced by untreated mental illness and the need for covering and treating these disorders just as other illnesses are handled.

Although this step is a crucial one, there is much more work that needs to be done to ensure that people with mental illness and substance addiction receive parity. The Senate unanimously passed their own version of a mental health parity bill last year, and there are several important differences between the two bills that must be resolved.

Speaking to the New York Times, House Speaker Nancy Pelosi said, "Illness of the brain must be treated just like illness anywhere else in the body." It is evident that much of the public shares this same view. A 2007 survey by Mental Health America found that 89% of Americans want to end discrimination against people with mental health needs. ❖

Giving it the “Old C



Look at his abilities! Tim DeChant's drive to learn takes him to the college classroom and beyond.



When Tim DeChant sets his sights on something, it's a pretty good bet that he is going to accomplish it. This energetic and positive young man came to the W.D. Partlow Developmental Center in Tuscaloosa in August of 2005. From the beginning, the staff at the Education Department of Vocational Services recognized that Tim had the drive to learn.

He had been into computers for quite some time, and enjoyed working on them; using drawing programs to create art and document programs to write letters to his friends. When the staff picked up on his interest, they talked to Tim about possibly taking some computer classes at a local community college. Needless to say, Tim was ecstatic.

He soon found himself at Shelton State Community College in Tuscaloosa. As he got his books and materials for his class, the anticipation and excitement was written all over his face. He said, "I really can't describe how I was feeling when I walked into the front door for the first

time, but it was pretty awesome." His first class was "Introduction to Computers and Microsoft XP." Tim recently completed that class, and has now moved on to taking "Microsoft 2003." He goes to class every Wednesday and says, "That is my favorite day of the week."

He likes the other students and especially his teacher, Mr. Cooper. "He explains things really well and makes it easy to follow," Tim says. Another thing he likes about his college experience is the learning itself. He knows much more about computers now and says that it makes him want to learn even more.

When Tim is not at Shelton State learning about computers, he certainly is not sitting still. Tim keeps busy at his job as well. He washes dishes at the Latham Training Center on Partlow's campus. As Tim says, getting out and meeting new people is definitely a plus about the job, but what he likes most is that he gets the opportunity to make his own money. His newest

College Try”



purchase is a brand-new refrigerator he recently bought for the apartment he shares with three roommates at Partlow.

If you thought his busy streak ends with going to class and working, you would be wrong. Tim also recently added another accomplishment to his list. He is now the proud owner of an Alabama driver's learning permit. When the Vocational Services department at Partlow put out the word that they would be opening up a new class to teach driver's education, Tim was one of the first to come and express his interest.

"I have just always been interested in learning new things and making sure I have as much fun as I can while I'm doing it."

After Vocational Services found the staff to teach, coordinated the classes and got their materials, Tim, along with Laura Newman and Jason Thacker, began his journey to learn about driving. They put in a lot of work coming to class twice a week and studying for the test at home in their spare time. Tim was especially excited about visiting the Alabama State Trooper's office to become familiar with the staff and how the test would be given.

Everyone's effort and hard work paid off when Tim, Laura



and Jason all passed the test. Tim was a little apprehensive about having to take the test, but said that he got plenty of books and cd's that he used on his computer to help him study. In the end, he thought the test was, "okay," saying he really felt like he did well when he was taking it.

Tim is excited about the possibility of driving, even mentioning that he hopes the staff at Vocational Services will soon get in the car with him and ride around. He does not have a particular destination he would like to drive to, but just says, "It will be nice to just get behind the wheel and take off to the place I feel like going to that day."

So, what is next for Tim to accomplish? Basketball's self-professed number one fan loves to watch the games on his television at night. He thinks it would be great to go and watch the Florida Gators, his favorite team, in action at their arena.

For now though, he is pretty happy with what he has accomplished so far. "The people here at Partlow have been nice, and have really worked hard to make sure I get the chance to do some of the things I have always wanted. I have just always been interested in learning new things and making sure I have as much fun as I can while I'm doing it." Those words could serve as an inspiration to us all. ❖

DMHMR's Speaker's Bureau



With the purpose of fostering understanding and increasing awareness, the department recently revived its Speaker's Bureau. Volunteer professionals and advocates are eager to visit with clubs, organizations, schools, church groups and more to speak about a full range of topics related to mental illness, mental retardation or substance abuse issues. Our speakers can also tailor presentations to fit the unique needs of a group - whether it is speaking about the history of mental

health care in Alabama, or talking about a specific mental illness, intellectual disability or substance abuse diagnosis.

The Office of Public Information maintains the department's Speaker's Bureau and has several DVD resources such as *The Legacy of Wyatt*, *The Charley Pell Story*, *Addiction* (an HBO Special), and *Community Mental Health Issues Affect You!* that can complement a presentation.

For more information or to arrange a speaker, contact the Office of Public Information at 334-242-3417. You can also visit the department's Web site at www.mh.alabama.gov, and go to the News and Publications link to learn more about the Speaker's Bureau or to arrange for a speaker at your next meeting. ❖

ACCMHB Hosting 33rd Annual Conference

The Alabama Council of Community Mental Health Boards (ACCMHB) will hold its 33rd Annual Conference May 14-15, 2008, in Birmingham. ACCMHB officials expect more than 800 participants to attend the comprehensive workshop conference. They also expect more than 50 exhibitors and vendors who will be showcasing their products and services. The council is proud to say that their conference aims to feature something for nearly every mental health professional.

The two-day conference will have workshop tracks covering geriatric care, substance abuse recovery, administrative work, consumer recovery, children's mental health and adolescent co-occurring disorders. Clifton Mitchell, Ph.D., author and national speaker will be presenting "Self-Improvement Through Precision Communication: Using Your Mind for a Change." An awards luncheon will be held on the second day, and the speaker will be Paolo del Vecchio, MSW, who is the associate director for consumer affairs at the Federal

Center for Mental Health Services at the Substance Abuse and Mental Health Services Administration.

Mental health professionals, board members, counselors, juvenile justice professionals, nurses, social workers, educators, substance abuse professionals, nursing home personnel and psychiatrists are encouraged to attend the conference, along with consumers and family members.

If you are interested in finding out more information about the conference, please visit the council's Web site at www.accmhb.org. You will find a full preliminary agenda listing all workshop sessions along with their presenters, as well as information on possible hotel accommodations, becoming an exhibitor or sponsor and the conference registration form. ❖



Good Times Ahead at the 16th annual Alabama *Recovery* Conference

One of the highlights of the year for many consumers across the state is the Alabama Recovery Conference. Each spring, consumers gather for three days of education and fellowship. This year's conference will be held April 29 - May 1, at Shocco Springs, outside of Talladega.

The education aspect of the workshop comes in the form of several workshops that consumers can choose to attend. This year, some of the workshops offered include "Peer Support Specialist: Making Recovery Personal," "Protect Yourself from Identity Theft," "In Our Own Voice" and "Listening to and Learning from Consumers." The conference will also feature nationally known speakers, one of whom will be Joe Rogers, Founder of the National Mental Health Consumers' Self-Help Clearinghouse in Philadelphia.

Education is only one of the purposes of the Alabama Recovery Conference. Fun and fellowship is also a goal of the conference, and plenty of activities have been coordinated for that purpose. On the first day, the Respect Awards will be handed out which are presented to caregivers, whether professional, family, friend or fellow consumer, who are consistently respectful to persons with a mental illness. The conference will also give attendees an opportunity to attend a dance and take part in a talent show and candlelight vigil.

For more information about the Alabama Recovery Conference, contact the Office of Consumer Relations at (334) 242-3456, or go to the department's Web site at www.mh.alabama.gov to find the registration form. ❖

ASADS

Continues its *Success*

The 33rd annual Alabama School of Alcohol and other Drug Studies (ASADS) sought to provide those involved in the enforcement, prevention, identification, treatment, assessment and rehabilitation of chemical abuse and dependency with a quality educational experience. Thanks to a very involved board of directors, the conference did just that. ASADS is a collaborative effort of more than 20 organizations and state agencies, including the department.

More than 700 people attended the five-day conference that was recently held in Tuscaloosa. More than 40 courses were offered to participants and were presented by top substance abuse professionals throughout the nation. A major part of planning the conference had to do with determining what courses would be offered; therefore, the board looked at national and state trends in substance abuse, as well as submissions from last year's attendees as describing what they would like to see in the future. The courses covered a broad range of topics including "The Art and Science of Interventions," "Ethics for Addiction Professionals," "MAPping Out Priorities: Stress and Time Management" and "Learning the 12 Core Functions of Counseling."

Kathy Seifried, Director of Certification and Training in the Division of Substance Abuse Services and the department's representative on the board, said that, "I am proud to be on a board that is truly a working board. Everyone works together and does their own part to make sure this conference is truly educational and worthwhile for attendees." Kathy's role included contacting and coordinating the speakers for the courses, as well as designing the brochure and making hotel reservations.

The board must be doing something right, as ASADS is the longest running school of its kind in the nation. ❖



Phase One of Black Belt Initiative: **LAUNCHED**



Interdisciplinary Mobile Unit Hits the Road Increasing Access to Care

Phase one of the Mental Health Black Belt Initiative funded by the Bristol-Myers Squibb Foundation has begun. A consortium of groups worked for several years on the grant, which provided \$1.2 million to implement various mechanisms to enhance education and stigma reduction efforts, increase access to services, increase the development of family support groups, provide housing evaluations, mobile mental health services and primary medical care for rural under served areas in west Alabama.

Pictured above is the Interdisciplinary Mobile Unit (IMU) that will be the first outreach mechanism in the new initiative. From left to right are Bristol-Myers Squibb representative Natasha Johnson, West Alabama Mental Health Center Executive Director Kelly Parris-Barnes, Alabama DMHMR Commissioner John Houston, Gavin and Jim - two rural medical students and Senator Gerald Dial who is Director of the Governor's Alabama Rural Action Commission. Additionally pictured are Max Joiner, West Alabama Mental Health Center Board Member, John Crawford, Marengo County Commissioner, and Fr. Brian Hatchett, another West Alabama Mental Health Center Board Member.

The need for an IMU was made evident in surveys distributed to stakeholders by West Alabama Mental

Health Center concerning the need for services and the quality of services they receive from West Alabama Mental Health Center. Executive Director Kelly Parris-Barnes said, "Overwhelmingly, they indicated for the past three years the need for a mobile unit for services." The IMU will provide a variety of services in rural areas including medical examinations and medication assistance by a nurse practitioner, psychiatric therapy, housing evaluations, as well as primary health care such as dental services and healthcare screenings.

Partners in the grant are preparing other outreach mechanisms that will soon launch. Those partners include the Alabama DMHMR, University of Alabama in Birmingham (Department of Psychiatry), Community Care Network in Montgomery, National Alliance for the Mentally Ill (NAMI Alabama), University of Alabama (Tuscaloosa) College of Community Health Sciences and five community mental health centers serving 12 counties in the Black Belt.

Commissioner Houston said, "I am extremely proud of the efforts of all partners in this initiative to bring services to the people in the most remote and disadvantaged areas of our state. I fully expect that the services that evolve from this collaborative effort will be a model for other under served areas of the United States." ❖

Discovering her *Purpose*

Debbie Walker, on staff at Indian Rivers Mental Health Center

When Debbie Walker started her first day as Administrative Assistant at Indian Rivers, it was not like most people's typical first day. Her sister had been a therapist there for many years, and Debbie already knew many of the employees at the center and about the work that Indian Rivers did. What she did not know when she began that first day is that Indian Rivers would have such an impact on her or how her work there would make such an impact on others.

As Debbie began getting to know many of the clients, she felt the need to better serve them, while at the same time bettering herself. She enrolled in the University of Alabama's external degree program in 2001, balancing her schoolwork focusing on human services while working full-time at Indian Rivers. She finished her bachelor's in human services in December of 2006, but that was not the end of her journey.

From that experience, Debbie had her momentum built, and wanted to tackle even more. She got that chance in June 2007 when she began studies at the University's School of Social Work Graduate Program. As part of her schoolwork, she is working a 500-hour placement at the University Medical Center. The same month she began that program, Debbie was promoted to Consumer Needs Specialist at Indian Rivers, and is continuing to work full-time in that position.

While Debbie certainly has her "plate full" for some time (she hopes to graduate with her master's in summer of 2009), you'd never know it. Her exuberant attitude makes it apparent that she loves what she is doing - both inside the classroom and at Indian Rivers. Debbie says that she chose social work as her major because she wanted to learn how to better link people with the services they



need and learn more about community resources for consumers.

She displays that same exuberant attitude when talking about one of her "success stories," a client who has lived in a group home for more than 20 years that is moving into his own apartment in the community. Debbie holds Consumer Family Council Meetings once a month to give consumers and family members information about

services and programs at Indian Rivers, as well as a chance for them to give feedback. She invited this client to come out to the meetings several times, and when he finally did make it to some, he would never come in the room but would hang around outside. Eventually he started trickling in to some of the meetings, talking with others and even started to come to dances and social events the group would have. Now, she says he's come full circle and she has seen a huge change. He is more active in his treatment and more outgoing socially.

*"A mental
illness
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Debbie's enthusiasm is obvious when she talks about letting the public know about the support they can give to those in recovery. She says, "When we are talking about a person with a cancer diagnosis, we don't say that 'they are cancer,' but it seems to be acceptable to say that he/she is mentally ill. A mental illness diagnosis does not define a person anymore than a cancer diagnosis. Community support and resources are such an important component for recovery. We need to focus on educating the community about mental illness. Raising awareness of the struggles and needs of those going through recovery can only help." ♦



Scenes FROM THE 2008 "People Can't Wait" RALLY



On March 12, more than 500 people gathered on the steps of the Alabama State House to advocate for more opportunities for individuals with intellectual disabilities.



The rally, sponsored by the Arc of Alabama, PeopleFirst and many other organizations is meant to raise awareness that "People Can't Wait" ... they need services and a helping hand so that they can become more independent and help themselves.

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